

## PART B - FEE(S) TRANSMITTAL

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05/:	10/2007 LWONDIAS 00	000078 10694147		\A		hristina	Deet	er	(Depositor's name)	
	C:2501	700.00 OP		THEN & TI	PADENIA	Christing Deeter			(Signature)	
	C:1504 300.00 ( C:8001 30.00 (			Jr ·		May 7, 2007			(Date)	
	APPLICATION NO. FILING		TE		FIRST NAMED INVENTO	ATTOR		RNEY DOCKET NO.	CONFIRMATION NO.	
	10/694,147	10/27/2003	0/27/2003		Nicholas Want		AMD-104US		3026	
	TITLE OF INVENTION: METHOD AND APPARATUS FOR HANGING A MEDICAL DEVICE									
	APPLN. TYPE	SMALL ENTITY	18	SHE EEE DHE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FFF T	OTAL FEE(S) DUE	DATE DUE	
	nonprovisional	YES	STOO \$700		\$300	\$0		\$1000	05/08/2007	
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	EXAMINER		ART UNIT		CLASS-SUBCLASS	<u>\$1,030</u>		<u>\$1,030</u>	-	
	CHAN, KO HUNG 3632				248-304000					
	1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,					
	Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.									
	"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
	3. ASSIGNEE NAME A									
	PLEASE NOTE: Uni	less an assignee is ident h in 37 CFR 3.11. Com	ified be	elow, no assignee of this form is NO	data will appear on the T a substitute for filing a	patent. If an assigr assignment.	nee is ident	ified below, the do	ocument has been filed for	
	(A) NAME OF ASSI				(B) RESIDENCE: (CIT					
	ATRIUM M	ATRIUM MEDICAL CORPORATION Hudson, New Hampshire 03051								
	Please check the appropriate assignee category or categories (will not be printed on the patent):									
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	Publication Fee (No small entity discount permitted)				Payment by credit card. Form PTO-2038 is attached.					
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	5. Change in Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.				☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).					
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	Authorized Signature	Joshua	L.	Cohen		Date	lay	7,200	7	
	Typed or printed nam	<sub>e</sub> Joshua L.	Col	ien		Registration !	ار.38 مار	040		
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## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/694,147	
Filing Date	October 27, 2003	
First Named Inventor	Nicholas Want	
Art Unit	3632	
Examiner Name	Ko Hung Chan	
Attorney Docket No.	AMD-104US	

ENCLOSURES (Check all that apply)								
Fee Transmit	ittal Form ttached		Drawing(s)			After Allowance Communication to TC		
Amendment/			Licensing-related	l Papers		Appeal Communication to Board of Appeals and Interferences		
After F	Final vits/Declaration(s)		Petition to Conve Provisional Appli			Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)		
Extension of	Time Request		Power of Attorney, Revocation, Change of Correspondence Address  Terminal Disclaimer		Proprietary Information			
Express Aba	andonment Request				Status Letter			
Information D	Information Disclosure Statement		Request for Refund			Other Enclosure(s) (please identify below): Issue Fee Transmittal; PTO-2038; Return		
Certified Cop	py of Priority Document(s)		CD, Number of C	D(s) Table on CD		Receipt Postcard		
Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53			<u>rks</u> :					
SIGNATURE OF APPLICANT, ATTORNEY OR AGENT								
Firm Name Ra	atnerPrestia	- 1		<u> </u>				
Signature	$\sim$	JSV	Ma L.	Colle	•			
Printed Name Joshua L. Cohen								
Date May 7, 2007				Registration No.	38,0	)40		
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Typed or Printed Name Joshua L. Cohen		J			Date	May 7, 2007		

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